



11696 U.S.PTO

***IN THE UNITED STATES PATENT AND TRADEMARK OFFICE***

Applicant: Muchin et al.  
 Title: BATTERIES, ACCESSORIES,  
       MARKETING BUNDLES AND  
       MARKETING METHODS  
 Appl. No.:  
 Filing Date:  
 Examiner:  
 Art Unit:

<u>CERTIFICATE OF EXPRESS MAILING</u>	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.	
EL 979077502 US (Express Mail Label Number)	12/30/03 (Date of Deposit)
Carolyn Simpson <small>(Printed Name)</small> <i>Carolyn Simpson</i> <small>(Signature)</small>	

10/74889  
2287 U.S.PTO**UTILITY PATENT APPLICATION  
TRANSMITTAL**

Mail Stop PATENT APPLICATION  
 Commissioner for Patents  
 PO Box 1450  
 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Jay Z. Muchin  
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[  ] Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- [ X ] Specification, Claim(s), and Abstract (53 pages).
- [ X ] Formal drawings (5 sheets, Figures 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17).
- [ X ] Declaration and Power of Attorney (5 pages).
- [ X ] Information Disclosure Statement (2 pages).
- [ X ] Form PTO/SB/08 (1 page) with 9 listed reference(s).
- [ X ] Application Data Sheet (37 CFR 1.76) (3 pages).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$770.00 =	\$770.00
Total Claims:	85	- 20	= 65	x \$18.00 =	\$1,170.00
Independents	23	- 3	= 20	x \$86.00 =	\$1,720.00
If any Multiple Dependent Claim(s) present:			+ \$290.00 =	\$0.00	
			SUBTOTAL: =	\$3,660.00	
[ X ]		Small Entity Fees Apply (subtract ½ of above):	=	\$1,830.00	
			TOTAL FILING FEE: =	\$1,830.00	

[ X ] A check in the amount of \$1,830.00 to cover the filing fee is enclosed.

[ X ] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date Dec. 30, 2003

By Todd A. Rathe

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